U.S. Bankruptcy Court Eastern District of Kentucky TRANSCRIPT REQUEST					FOR COURT STAMP ONLY		
	1	PLEASE COMP	DRM				
1. NAME				2. PHONE NUMBER	3. DATE		
4. MAILING ADDRESS				5. CITY	6. STATE	7. ZIP CODE	
8. CASE NUMBER 9. JUDGE ASSIGNED			ED		PROCEEDINGS		
40.010077777				10. FROM	11. TO		
12. CASE NAME				LOCATION OF PROCEEDINGS 13. CITY 14. STATE			
15. ORDER FOR ☐ APPEAL ☐ CRIMINAL ☐ NON-APPEAL ☐ CIVIL			☐ CRIMINAL JUSTICE ACT ☐ IN FORMA PAUPERIS	X BANKRUPTCY ☐ OTHER (Specify)			
16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)							
]	PORTIONS	DATE(S)		PORTION(S)	DATE(S)		
Entire hearin	g			TESTIMONY (Specify Witness)			
Witness							
☐ Witness ☐ Witness							
Ruling of the Court only							
Runnig of the Court only				OTHER (Specify)			
17. ORDER							
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